DISCLOSURE

FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE



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DR-2

COMMITTEE NAME (Must be same as on Statement of Organiz	etion R. F. C. F. I. V. E. U.	(Re	7. 12/2005) REPORT		
COMMITTEE NAME (Must be same as on Statement of Organiz	JAN 18 2008	سعدا ا	Office Use Only		
The committee to elect Marnie Cline	JAN 1 0 2000		nm.#		
IMPORTANT: Indicate by # type of committee you are reporting for	or: S	1 1	ged In		
(1) Statewide/Legislative/Judge Standing for Retention Candidate	ndidate (7)School Board or Other	1 1	nned		
Political Subdivision Candidate (8) County PAC (9) City PAC (	10 )School Board or Other Political	1 1	nputer		
Subdivision PAC (11) Local Bailo Issue CANDIDATE COMMITTEES ONLY:		Aud	lited		
Candidate Name	Political Party (If applicable)	1 1 1	le with:		
Marnie Cline	REBUPLICAN	1 1	towa Ethics and Campaign Disclosure Board		
Office Sought	District (if Senate or House)	5	10 E. 12 <sup>n</sup> , Ste. 1A		
Adams County Supervisor			es Moines, Iowa 50319 ax: 515-281-3701		
ate reports are subject to possible civil and criminal penalties. P	unsuant to lowe Code section 68B.32	(A(7)	8X: 515-261-3/U1		
he candidate, for a candidate's committee, and the chairperson.	for any other type of committee, is th	e	1 1		
ndividual responsible for filing timely and accurate reports.			1/10/08		
I Y arnel ("line	<u>641-335-</u>	CCEE	DATE SIGNED		
SIGNATURE OF PERSON FILING REPORT	TELEPHONE				
Tananara I Oth		NAMON ELEC	TION YEAR		
AM FILING A January 19th	REPORT FOR (1) ELECTION /(2)		FITCH TO N.V.		
(report date)					
CHECK IF AMENDMENT TO REPORT DATED		1	mittees, enter Date of Election		
Check if this is final (termination) report and attach Notice of D	hesalution Form DR-3	11/07/200			
Check if this is final (termination) report and add reduced of a (You must continue to file reports until a DR-3 is filed.)	nagoration ( on over o.		ounty & Local Committees, enter County in nich Election is held		
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ADAMS			
STATEM	ENT OF CASH ON HAND				
CASH ON HAND at the beginning of the reporting period. (Total	of all funds held by the				
committee. This amount MUST he the same as the case	sh on hand at the end	· c	400.01		
of the last reporting period or must be zero if this is fire	st report filed.)				
ADD TOTAL MONEY TAKEN IN THIS PERIOD			0.00		
Schedule A: Cash Contributions total (Attach Schedul			0.00		
Schedule F: Loans Received total (Attach Schedule F			0.00		
Schedule H. Total Sales of Campaign Property (Attach					
(Schedule H applies to Candidates' Com		_	400.01		
	SUB-TOTAL	\$	400.01		
SUBTRACT TOTAL MONEY SPENT THIS PERIOD			400.01		
Schedule B: Expenditures total (Attach Schedule B)			0.00		
Schedule F. Loan Repayments total (Attach Schedule	F)		0,00		
CASH ON HAND at the end of this reporting period (if final report	t balance must		0.00		
be zero) (Attach DR-3)		\$			
"UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	0.00		
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule	E)	\$	0.00		
**OUTSTANDING LOANS (From Schedule F - Attach Schedule	F)	\$	0.00		
CONSULTANT BREAKDOWN (Schedule G Attached?)			YES VO		
CANDIDATE COMMITTEES ONLY:					
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Altach	Schedule H)	\$	0.00		
STATE COMMITTEES: Submit a reconciled campaign account		ear.			
STATE COMMITTEES: Submit a reconciled campaign account	Out a manufacture at the second of the second				

FOR INSTRUCTIONS, SEE BACK OF FORM

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## EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTE	E NAME (Must bo	same as on Statement of Organization)		
The commit	tee to elect Marnie	Clinc		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
01/18/08	ID# CK# 51699 ID#	Friends of Prescett Founda Box 1 Prescett, LA 50859	ction Charitable Contribution to Scholarship awards	\$400.01
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
-			SUB-TOTAL	\$
			TOTAL (if last page of this schedule)	\$ 400.01

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:			
Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (F	Refer to Schedule H ins	tructions.)	
Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organiz Schedule G by the emount, purpose, and date of each type of expenditure made by the person/entity on b Schedule G instructions and lowa Code 68A.402(3)(i)-)	ing services must also lehalf of the candidate's	be detail itemic committée. (	zed on Refer to
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